

STATE OF CALIFORNIA
STATE AND CONSUMER SERVICES AGENCY
CALIFORNIA BUILDING STANDARDS COMMISSION
2525 NATOMAS PARK DR., SUITE 130
SACRAMENTO, CA 95833
(916) 263-0916 Phone
(916) 263-0959 Fax
Email: cbsc@dgs.ca.gov

Office Use Item No. _____

PARTICIPATION COMMENTS FOR THE NOTICE DATED AUGUST 24, 2012
Written comments are to be sent to the above address.

WRITTEN COMMENT DEADLINE: OCTOBER 8, 2012

Date: Oct. 3, 2012

From: Jeffrey F. Peipert, MD, PhD (signature attached)

Name (Print or type)

(Signature)

-- **Individual**

Agency, jurisdiction, chapter, company, association, individual, etc.

Robert J. Terry Professor, Vice Chair of Clinical Research, Department of Obstetrics and
Gynecology, Washington University in St. Louis, School of Medicine

Street

City

State

Zip

I/We do not agree with:

[XX] The Agency proposed modifications As Submitted on Section No. 217.0 Title 24 Parts 4 & 5

and request that this section or reference provision be recommended:

[] Approved [] Disapproved [] Held for Further Study [XX] Approved as Amended

Suggested Revisions to the Text of the Regulations:

In section 217.0, OSHPD 3SE definition at subsection (2) strike the exclusion of primary care clinics that provide abortion services. “(2) Primary care clinics that provide abortion services”

Reason: [The reason should be concise if the request is for “Disapproval,” “Further Study,” or “Approve As Amend” and identify at least one of the 9-point criteria (following) of Health and Safety Code §18930.]

Criteria 3 and 4 – Please see attached letter.



Washington University in St. Louis

SCHOOL OF MEDICINE

Jeffrey F. Peipert, M.D., M.P.H., M.H.A.

Vice Chair of Clinical Research

Robert J. Terry Professor

Department of Obstetrics and Gynecology

October 1, 2012

RE: Title 24 Amendments, Parts 4 & 5

Dear Attorney Spitz,

My name is Jeffrey F. Peipert, and I am the Robert J. Terry Professor of Obstetrics and Gynecology at Washington University in St. Louis. My research and clinical background is in family planning and infectious diseases. I received my medical degree from Emory University, my Masters in Public Health from Yale, and a PhD in epidemiology from Brown University. I am the President of the Infectious Disease Society in Obstetrics and Gynecology, and feel very qualified to comment on the risk of infection after a uterine evacuation or sampling procedure and risk factors associated with infection.

The risk of infection after an abortion or uterine evacuation procedure is quite low: less than 1%. Risk factors for infection include: 1) cervicitis (infection of the cervix with *Neisseria gonorrhea* or *Chlamydia trachomatis*); 2) an overgrowth of bacteria in the vagina (e.g. bacterial vaginosis); 3) use of unsterile instruments; 4) illegal abortion; and 5) poor (lack of sterile) technique. To my knowledge, there are no studies demonstrating that infection after an abortion is affected by plumbing or ventilation. Almost all infections after this procedure are introduced mechanically during the procedure. Airborne infections (due to inadequate ventilation) are not the mechanism of infection. I can think of no reason that plumbing would have any effect on infection risk.

Thus, any differential treatment of health clinics that perform abortions makes no clinical sense in terms of infection risk. There is no reason to have a different set of criteria for plumbing or ventilation for these clinical sites than other sites. As an expert in family planning and risks for female genital tract infection, it is my belief that there is **no evidence** that plumbing and ventilation impact infection risk.

If you have any further questions or concerns, please feel free to contact me (314-747-4016).

Sincerely,

Jeffrey F. Peipert, MD, PhD

Robert J. Terry Professor

Vice Chair of Clinical Research

Department of Obstetrics and Gynecology

peipertj@wustl.edu

HEALTH & SAFETY CODE SECTION 18930

SECTION 18930. APPROVAL OR ADOPTION OF BUILDING STANDARDS; ANALYSIS AND CRITERIA; REVIEW CONSIDERATIONS; FACTUAL DETERMINATIONS

- (a) Any building standard adopted or proposed by state agencies shall be submitted to, and approved or adopted by, the California Building Standards Commission prior to codification. Prior to submission to the commission, building standards shall be adopted in compliance with the procedures specified in Article 5 (commencing with Section 11346) of Chapter 3.5 of Part 1 of Division 3 of Title 2 of the Government Code. Building standards adopted by state agencies and submitted to the commission for approval shall be accompanied by an analysis written by the adopting agency or state agency that proposes the building standards which shall, to the satisfaction of the commission, justify the approval thereof in terms of the following criteria:
- (1) The proposed building standards do not conflict with, overlap, or duplicate other building standards.
 - (2) The proposed building standard is within the parameters established by enabling legislation and is not expressly within the exclusive jurisdiction of another agency.
 - (3) The public interest requires the adoption of the building standards.
 - (4) The proposed building standard is not unreasonable, arbitrary, unfair, or capricious, in whole or in part.
 - (5) The cost to the public is reasonable, based on the overall benefit to be derived from the building standards.
 - (6) The proposed building standard is not unnecessarily ambiguous or vague, in whole or in part.
 - (7) The applicable national specifications, published standards, and model codes have been incorporated therein as provided in this part, where appropriate.
 - (A) If a national specification, published standard, or model code does not adequately address the goals of the state agency, a statement defining the inadequacy shall accompany the proposed building standard when submitted to the commission.
 - (B) If there is no national specification, published standard, or model code that is relevant to the proposed building standard, the state agency shall prepare a statement informing the commission and submit that statement with the proposed building standard.
 - (8) The format of the proposed building standards is consistent with that adopted by the commission.
 - (9) The proposed building standard, if it promotes fire and panic safety as determined by the State Fire Marshal, has the written approval of the State Fire Marshal.